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APPLICATION NO.	F	ILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO	CONFIRMATION NO.		
10/663,853	53 09/16/2003		Pranhitha Reddy	3226-A	2860		
22932	7590	02/11/2005		EXA	EXAMINER		
IMMUNEX LAW DEPA			DESAI, ANAND U				
1201 AMGE			ART UNIT	PAPER NUMBER			
SEATTLE,	WA 981	19	1653				

DATE MAILED: 02/11/2005

Please find below and/or attached an Office communication concerning this application or proceeding.

## Interview Summary

Application No.	Applicant(s)		
10/663,853	REDDY ET AL.		
Examiner	Art Unit	_	
Anand U Desai, Ph.D.	1653		

	Examiner	Art Unit						
	Anand U Desai, Ph.D.	1653						
All participants (applicant, applicant's representative, PTO personnel):								
(1) Anand U Desai, Ph.D.	(3)							
(2) <u>Ms. Rosemary Sweeney</u> .	(4)							
Date of Interview: 01 February 2005.								
Type: a)⊠ Telephonic b)□ Video Conference c)□ Personal [copy given to: 1)□ applicant 2	t)  applicant's representative	·]						
Exhibit shown or demonstration conducted: d) Yes If Yes, brief description:	e) No.							
Claim(s) discussed: <u>1-6,15-17,19 and 26-31</u> .								
Identification of prior art discussed:								
Agreement with respect to the claims f) was reached. g) was not reached. h) № N/A.								
Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: <u>Discussed typographical error and scope of cytidine analogue for claim 15.</u> <u>Suggested submitting 312 amendment to clarify Applicants interpretation of claim 15.</u>								
(A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.)								
THE FORMAL WRITTEN REPLY TO THE LAST OFFICE A INTERVIEW. (See MPEP Section 713.04). If a reply to the GIVEN ONE MONTH FROM THIS INTERVIEW DATE, OR FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF Summary of Record of Interview requirements on reverse sign	last Office action has already THE MAILING DATE OF THIS OF THE SUBSTANCE OF TH	been filed, APPI S INTERVIEW S	LICANT IS UMMARY					

Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.

Examiner's signature, if required